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Fill in this information to identify your case:			
United States Bankruptcy Court for the:			
DISTRICT OF MARYLAND	-		
Case number (if known)	Chapter you are filing under:		
	■ Chapter 7		
	☐ Chapter 11		
	☐ Chapter 12		
	☐ Chapter 13	_	Check if this an amended filing

#### Official Form 101

# Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	rt 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is o	n <b>Ceiona</b>	
	your government-issued picture identification (for		First name
	example, your driver's	K.	
	license or passport).  Bring your picture identification to your meeting with the trustee.	Middle name	Middle name
		Harris	
		Last name and Suffix (Sr. Ir. II III)	Last name and Suffix (Sr., Jr., II, III)
	meeting with the truetee	•	
2.	All other names you ha used in the last 8 years Include your married or maiden names.		
3.	Only the last 4 digits o your Social Security number or federal Individual Taxpayer Identification number (ITIN)	f xxx-xx-4096	

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Debtor 1 Ceiona K. Harris

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
1.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs.  Business name(s)	☐ I have not used any business name or EINs.  Business name(s)		
		EINs	EINs		
5.	Where you live	2811 Taylor Avenue Parkville, MD 21234 Parkville, MD 21234	If Debtor 2 lives at a different address:		
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
	Baltimore				
		County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6. Why you are choosing this district to file for bankruptcy		Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one:  ☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		

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Deb	tor 1	Ceiona K. Harris				_	Case number (if known)	
Part	2:	Tell the Court About	Your Banl	cruptcy Ca	ase			
7.	Bank	chapter of the			brief description of each, see $\Lambda$ , go to the top of page 1 and ch		by 11 U.S.C. § 342(b) for Individuals Filing for Bani riate box.	kruptcy
	CHOC	sing to file under	■ Chap	oter 7				
			☐ Chap	ter 11				
			☐ Chap	ter 12				
			☐ Chap	oter 13				
8. How you will pa		you will pay the fee	ab or	■ I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or che a pre-printed address.				
					<b>y the fee in installments.</b> If yo ee <i>in Installments</i> (Official Form		otion, sign and attach the Application for Individual	ls to Pay
			☐ I re bu tha	equest that t is not rec at applies t	at my fee be waived (You may quired to, waive your fee, and m to your family size and you are	request this optional do so only if y unable to pay the	tion only if you are filing for Chapter 7. By law, a ju your income is less than 150% of the official pove e fee in installments). If you choose this option, yo d (Official Form 103B) and file it with your petition.	rty line ou must fill
9.	9. Have you filed for ■ No. bankruptcy within the							
		B years?	☐ Yes.					
				District		When	Case number	
				District		When	Case number	
				District		When	Case number	
10.	case filed not f you, partr	any bankruptcy s pending or being by a spouse who is iling this case with or by a business ner, or by an	■ No □ Yes.					
	affili	ate ?		Debtor			Relationship to you	
				District		When	Case number, if known	
				Debtor			Relationship to you	
				District		When	Case number, if known	
11.	Do v	ou rent your	■ No.	Go to	line 12.			
		lence?	■ No.	Has vo	our landlord obtained an evictio	n iudament agair	inst you?	
			<b>□</b> 1€5.		No. Go to line 12.	,g again		
						About an Evictior	on Judgment Against You (Form 101A) and file it a	s part of

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Deb	otor 1 Ceiona K. Harris				Case number (if known)	
Par	t 3: Report About Any Bu	sinesses	You Own	as a Sole Proprie	tor	
12.	Are you a sole proprietor of any full- or part-time ■ No. business?			Part 4.		
	buomeoo.	☐ Yes.	Name	and location of bus	siness	
	A sole proprietorship is a					
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			of business, if any		
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, Sta	tte & ZIP Code	
	it to this petition.		Chec	k the appropriate bo	ox to describe your business:	
				Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))	
				Single Asset Rea	I Estate (as defined in 11 U.S.C. § 101(51B))	
				Stockbroker (as d	defined in 11 U.S.C. § 101(53A))	
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))	
				None of the above	e	
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	If you are filing under Chapter 11, the court must know whether you are a small business debtor so that deadlines. If you indicate that you are a small business debtor, you must attach your most recent balar operations, cash-flow statement, and federal income tax return or if any of these documents do not exist in 11 U.S.C. 1116(1)(B).		a small business debtor, you must attach your most recent balance sheet, statement of federal income tax return or if any of these documents do not exist, follow the procedure		
	For a definition of small	No.	ı am r	not filing under Chap	oter 11.	
	business debtor, see 11 U.S.C. § 101(51D).			I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.		
		☐ Yes.	I am f	iling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.	
Par	t 4: Report if You Own or	Have Any	Hazardo	ous Property or An	y Property That Needs Immediate Attention	
14.	Do you own or have any	■ No.				
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is	the hazard?		
	public health or safety? Or do you own any property that needs			liate attention is		
	immediate attention?		needed,	why is it needed?		
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?		
					Number, Street, City, State & Zip Code	

Debtor 1 Ceiona K. Harris

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

] Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Del	otor 1 Ceiona K. Harris			Case numbe	(if known)		
Par	t 6: Answer These Quest	ions for R	eporting Purposes				
16.	What kind of debts do you have?	16a.	Are your debts primarily c individual primarily for a per	consumer debts? Consumer debts are define sonal, family, or household purpose."	ned in 11 U.S.C. § 101(8) as "incurred by an		
			☐ No. Go to line 16b.				
			Yes. Go to line 17.				
		16b.	Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.				
			☐ No. Go to line 16c.	☐ No. Go to line 16c.			
			☐ Yes. Go to line 17.				
		16c.	State the type of debts you	owe that are not consumer debts or busines	ss debts		
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapte	er 7. Go to line 18.			
	Do you estimate that after any exempt property is excluded and	■ Yes.		Do you estimate that after any exempt prop Is will be available to distribute to unsecured			
	administrative expenses		■ No				
	are paid that funds will be available for distribution to unsecured creditors?		☐ Yes				
18.	How many Creditors do	<b>■</b> 1-49		<b>1</b> ,000-5,000	☐ 25,001-50,000		
	you estimate that you owe?	☐ 50-99		☐ 5001-10,000	<b>5</b> 0,001-100,000		
		□ 100-1 □ 200-9		□ 10,001-25,000	☐ More than100,000		
19.	How much do you estimate your assets to be worth?	□ \$100,	50,000 01 - \$100,000 001 - \$500,000 001 - \$1 million	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion		
20.	How much do you estimate your liabilities to be?	<b>\$</b> 100,	50,000 001 - \$100,000 001 - \$500,000 001 - \$1 million	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion		
Par	t 7: Sign Below						
For	you	I have ex	camined this petition, and I de	clare under penalty of perjury that the inforr	mation provided is true and correct.		
				7, I am aware that I may proceed, if eligible, relief available under each chapter, and I ch			
				not pay or agree to pay someone who is not he notice required by 11 U.S.C. § 342(b).	ot an attorney to help me fill out this		
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.					
		bankrupt 1519, an	I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.  /s/ Ceiona K. Harris				
		Ceiona	K. Harris e of Debtor 1	Signature of Debtor	7 2		
		Executed	d on <b>April 12, 2019</b>	Executed on			
			MM / DD / YYYY	MM	/ DD / YYYY		

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Debtor 1 Ceiona K. Harris Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Jeffrey M. Siroo	ly	Date	April 12, 2019	
Signature of Attorney	for Debtor		MM / DD / YYYY	
Jeffrey M. Sirody 1	1715			
Jeffrey M. Sirody a	nd Associates			
1777 Reisterstowr Suite 360 East	Road			
Pikesville, MD 212	08			
Number, Street, City, State &	ZIP Code			
Contact phone 410-41	5-0445	Email address	smeyers5@hotmail.com	
11715 MD				
Bar number & State			<del></del>	

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			10 11002 200	1 1 1 1 1 1 1 2 1 1 2 1 1 2 1 1 2 1 2 1		
		nation to identify your	case:			
Deb	otor 1	Ceiona K. Harris First Name	Middle Name	Last Name		
	otor 2 use if, filing)	First Name	Middle Name	Last Name		
		nkruptcy Court for the:	DISTRICT OF MARYLA			
		Tikitapitey Court for tile.	DISTRICT OF MARTIES			
	se number				_	ck if this is an ended filing
Su Be a infoi your	mmary on second the second terms of the second	and accurate as possib out all of your schedulens, you must fill out a	le. If two married people es first; then complete th	nd Certain Statistical Information e are filing together, both are equally responsible the information on this form. If you are filing among the box at the top of this page.	e for supply	
Par	t 1: Summa	arize Your Assets				assets e of what you own
1.		<b>/B: Property</b> (Official Fo			\$	0.00
	1b. Copy line	e 62, Total personal pro	perty, from Schedule A/B		\$	7,766.72
	1c. Copy line	e 63, Total of all property	on Schedule A/B		\$_	7,766.72
Par	t 2: Summ	arize Your Liabilities				
						liabilities unt you owe
2.			aims Secured by Property nn A, Amount of claim, at	(Official Form 106D) the bottom of the last page of Part 1 of <i>Schedule L</i>	D \$	12,362.00
3.			Unsecured Claims (Officia 1 (priority unsecured claim	al Form 106E/F) ns) from line 6e of <i>Schedule E/F</i>	\$	3,442.00
	3b. Copy th	e total claims from Part	2 (nonpriority unsecured c	claims) from line 6j of Schedule E/F	\$	88,999.02
				Your total liabiliti	es \$	104,803.02
Par	t 3: Summa	arize Your Income and	Expenses			
4.		Your Income (Official Fo		ə I	\$	2,458.00
5.	Schedule J: Copy your m	Your Expenses (Official nonthly expenses from li	Form 106J) ne 22c of <i>Schedule J</i>		\$	2,444.00
Par	t 4: Answe	r These Questions for	Administrative and Stati	stical Records		
6.	-	•	er Chapters 7, 11, or 13? on this part of the form. C	check this box and submit this form to the court with	ı your other	schedules.
7.	■ Yes What kind o	of debt do you have?				
				debts are those "incurred by an individual primarily of for statistical purposes. 28 U.S.C. § 159.	for a person	al, family, or
	☐ Your d	ebts are not primarily	consumer debts. You have	ve nothing to report on this part of the form. Check	this box and	d submit this form to

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

the court with your other schedules.

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Debtor 1 **Ceiona K. Harris** Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

2,990.00

One Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total c	claim
Trom rate ron conceded En , copy the following.		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	3,442.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	74,142.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	77,584.00

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	Case 19-1	14902 DOCT THEC	10 <del>4</del> /12/19 1 a	<del></del>	
Fill in this info	rmation to identify your case a	and this filing:			
Debtor 1	Ceiona K. Harris				
Dobtor 2	First Name	Middle Name Las	t Name		
Debtor 2 (Spouse, if filing)	First Name	Middle Name Las	t Name		
United States B	ankruptcy Court for the: DIST	RICT OF MARYLAND			
Casa numbar					
Case number					☐ Check if this is an amended filing
					· ·
Official Fo	orm 106A/B				
		17			
	le A/B: Property separately list and describe items.		at fits in mars than one o	natogony list the asset in the	12/15
it fits best. Be as	complete and accurate as possible ded, attach a separate sheet to this	e. If two married people are filing to	ogether, both are equally	responsible for supplying	correct information. If
Part 1: Describe	e Each Residence, Building, Land,	or Other Real Estate You Own or I	Have an Interest In		
1. Do you own or	have any legal or equitable interes	t in any residence, building, land,	or similar property?		
<b>.</b>					
■ No. Go to Pa □ Yes. Where					
☐ Yes. where	is the property?				
Part 2: Describe	e Your Vehicles				
someone else di	ase, or have legal or equitable rives. If you lease a vehicle, also rucks, tractors, sport utility ve	report it on Schedule G: Exect			venicies you own that
□ No					
□ No ■ Yes					
<b>–</b> 165					
3.1 Make:	Nissan	Who has an interest in the pro	perty? Check one		laims or exemptions. Put ed claims on Schedule D:
Model:	Sentra	Debtor 1 only			ims Secured by Property.
Year:	2013	Debtor 2 only		Current value of the	Current value of the
Approxima Other info	ate mileage: 65000 rmation:	<ul><li>☐ Debtor 1 and Debtor 2 only</li><li>☐ At least one of the debtors ar</li></ul>	nd another	entire property?	portion you own?
		At least one of the debtors at	id another	4	
		Check if this is community (see instructions)	property	\$4,152.00	\$4,152.00
	nircraft, motor homes, ATVs and ats, trailers, motors, personal w				
Ехатрюв. Во	ato, trailoro, motoro, personar w	atororait, norming voccoic, chown	nobiles, motoreyele de	ocoonico	
■ No					
☐ Yes					
5 Add the doll	lar value of the portion you ov	vn for all of your entries from	Part 2, including any	entries for	<b>0.4.450.00</b>
pages you h	nave attached for Part 2. Write	that number here		=>	\$4,152.00
Part 3: Describe	a Vour Personal and Household Ite	ame			
	e Your Personal and Household Ite		items?		Current value of the
		,			portion you own? Do not deduct secured
					claims or exemptions.
	<b>joods and furnishings</b> lajor appliances, furniture, linens	s. china. kitchenware			
□ No		s, sa, mononwaro			

De	ebtor 1	Ceiona K. H	arris Case number	(if known)
	■ Yes.	Describe		
			Miscellaneous goods and furnishings, bed room set, kitchen set, living room set, lamps, end tables, coffee table, kitchenware, linens, bedding, sofa, chairs, etc	\$800.00
7.	□ No	les: Televisions a	nd radios; audio, video, stereo, and digital equipment; computers, printers, scanner phones, cameras, media players, games	s; music collections; electronic devices
			2 TY's, laptop, printer, alarm clock, radio, watch, cell phone, watch, refrigerator, dishwasher, microwave, toaster, washer/dryer, etc	\$150.00
8.	Example  No		figurines; paintings, prints, or other artwork; books, pictures, or other art objects; st ons, memorabilia, collectibles	amp, coin, or baseball card collections;
9.	Example  No	nent for sports a les: Sports, photo musical instr	graphic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis	s; canoes and kayaks; carpentry tools;
10.	Firearr Examp ■ No	ms	s, shotguns, ammunition, and related equipment	
11.	□ No		othes, furs, leather coats, designer wear, shoes, accessories	
			Miscellaneous clothing and wearing apparel, misc. shoe apparel, boots, coats, jackets, hats, pants, shorts, shirts, socks, undergarments, etc	\$200.00
12.	□ No	•	welry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watche	s, gems, gold, silver
			Junk Costume Jewelry	\$200.00
13.	Exam <sub>l</sub> ■ No	arm animals ples: Dogs, cats, Describe	birds, horses	
14.	■ No	ther personal an	d household items you did not already list, including any health aids you did i	not list

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Debtor 1 Ceiona K. Harris Case number (if known)					
15				n Part 3, including any entries for pages you have attached	\$1,350.00
Pa	rt 4: Describe Your Fina	ancial Asset	ts		
Do	o you own or have any	y legal or e	equitable interest	in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
	Cash Examples: Money yo □ No ■ Yes	·		home, in a safe deposit box, and on hand when you file your petition	on
				Cash	\$40.00
17.				ccounts; certificates of deposit; shares in credit unions, brokerage hats with the same institution, list each.	nouses, and other similar
	Yes			Institution name:	
		17.1.	Checking	B of A Bank Account xxxx7463	\$37.00
		17.2.	Savings	JHU FCU Bank Account xxxx4745	\$25.72
		17.3.	Checking	JHU FCU Bank Account xxxx4745	\$521.00
		17.4.	Checking	M & T Bank Account xxxx4790	\$1.00
18.	Bonds, mutual funds			brokerage firms, money market accounts	
	■ No □ Yes		Institution or issue		
19.	and joint venture	stock and	l interests in inco	rporated and unincorporated businesses, including an interes	t in an LLC, partnership,
	■ No □ Yes. Give specific		n about them me of entity:		
	Negotiable instrumer Non-negotiable instru ■ No	nts include uments are	personal checks, c those you cannot	egotiable and non-negotiable instruments cashiers' checks, promissory notes, and money orders. transfer to someone by signing or delivering them.	
	☐ Yes. Give specific in		about them uer name:		
	Retirement or pension Examples: Interests in No			), 403(b), thrift savings accounts, or other pension or profit-sharing	plans
	■ Yes. List each acco		ately. of account:	Institution name:	
		IRA		Millenium Retirement Acct.	\$1,640.00

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D	ebtor 1	Ceiona K.	Harris		Case number (if k	nown)
22.			nd prepayments			
					nue service or use from a company ric, gas, water), telecommunications o	companies, or others
	☐ Yes			Institution na	me or individual:	
23.	Annuitie	es (A contrac	t for a periodic paymer	nt of money to you, either for	life or for a number of years)	
	☐ Yes		Issuer name and desc	ription.		
24.			ation IRA, in an accou ), 529A(b), and 529(b)		gram, or under a qualified state tuiti	on program.
	☐ Yes		Institution name and o	lescription. Separately file the	e records of any interests.11 U.S.C. §	521(c):
25.	Trusts,  No	equitable or	future interests in pr	operty (other than anything	listed in line 1), and rights or power	ers exercisable for your benefit
	☐ Yes.	Give specific	information about then	n		
26				ecrets, and other intellectuals, proceeds from royalties ar		
	☐ Yes.	Give specific	information about then	n		
27.	Example No ■	es: Building p	s, and other general in permits, exclusive licent information about then	ses, cooperative association	holdings, liquor licenses, professional	llicenses
М		roperty owe				Current value of the
	, ,	. ,	ŕ			portion you own? Do not deduct secured claims or exemptions.
28	Tax refu ■ No	ınds owed to	you you			
		Give specific i	nformation about them	, including whether you alrea	dy filed the returns and the tax years	 
29.	■ No	les: Past due	or lump sum alimony,	spousal support, child suppo	rt, maintenance, divorce settlement, p	roperty settlement
30.	Example ■ No	es: Unpaid w benefits;	neone owes you rages, disability insuran unpaid loans you made information	ice payments, disability bene e to someone else	fits, sick pay, vacation pay, workers' (	compensation, Social Security
31.	Interest	s in insuran	ce policies	ce; health savings account (H	ISA); credit, homeowner's, or renter's	insurance
	■ No		,			
	⊔ Yes. N	name the insi	urance company of eac Company nam	ch policy and list its value. e:	Beneficiary:	Surrender or refund value:
32.	If you a someon	re the benefic ne has died.	ciary of a living trust, ex	rom someone who has died cpect proceeds from a life ins	I urance policy, or are currently entitled	to receive property because
		Give specific	information			

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Debtor 1	Ceiona K. Harris		Case number (if known)	
Exar	ns against third parties, whether or not you have filed a lamples: Accidents, employment disputes, insurance claims, or		and for payment	
■ No □ Yes	s. Describe each claim			
		l	at the deliterate deliberate and a	ee alabaa
34. Otne No	r contingent and unliquidated claims of every nature, inc	duding counterclaims	of the deptor and rights to set o	TT CIAIMS
	s. Describe each claim			
35. <b>Anv f</b>	inancial assets you did not already list			
■ No				
☐ Yes	s. Give specific information			
	I the dollar value of all of your entries from Part 4, includ Part 4. Write that number here		ges you have attached	\$2,264.72
Part 5:	Describe Any Business-Related Property You Own or Have an Inter	rest In. List any real estate	e in Part 1.	
37. <b>Do yo</b> u	u own or have any legal or equitable interest in any business-relate	ed property?		
■ No. 0	Go to Part 6.			
☐ Yes.	Go to line 38.			
If	Describe Any Farm- and Commercial Fishing-Related Property You fou own or have an interest in farmland, list it in Part 1.			
	ou own or have any legal or equitable interest in any farn o. Go to Part 7.	n- or commercial fishi	ng-related property?	
_	es. Go to line 47.			
<b>□</b> 10	es. Go to line 47.			
Part 7:	Describe All Property You Own or Have an Interest in That Yo	u Did Not List Above		
Exar	ou have other property of any kind you did not already lis	st?		
■ No	s. Give specific information			
	3. Give specific information			
54. <b>Add</b>	I the dollar value of all of your entries from Part 7. Write	that number here		\$0.00
Part 8:	List the Totals of Each Part of this Form			
55. <b>Pa</b> r	t 1: Total real estate, line 2			\$0.00
	t 2: Total vehicles, line 5	\$4,152.00		\$0.00
	t 3: Total personal and household items, line 15	\$1,350.00		
	t 4: Total financial assets, line 36	\$2,264.72		
	t 5: Total business-related property, line 45	\$0.00		
	t 6: Total farm- and fishing-related property, line 52	\$0.00		
	t 7: Total other property not listed, line 54	+ \$0.00		
			Convenend	<b>*7 700 7</b>
62. <b>Tot</b> a	al personal property. Add lines 56 through 61	\$7,766.72	Copy personal property total	\$7,766.72
63. <b>Tot</b> a	al of all property on Schedule A/B. Add line 55 + line 62			\$7,766.72

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Fill in this infor	mation to identify y	our case:		
Debtor 1	Ceiona K. Har	ris		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the	ne: DISTRICT OF MARYLA	ND	
Case number				
(if known)				Check if this is an amended filing
Official Fo	orm 106C			
Schedul	e C: The I	Property You C	Claim as Exempt	4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Pa	It 1: Identify the Property You Claim as E	Exempt								
1.	Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.									
	You are claiming state and federal nonbar	kruptcy exemptions.	11 U.S	S.C. § 522(b)(3)						
	☐ You are claiming federal exemptions. 11	U.S.C. § 522(b)(2)								
2.	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.									
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption					
		Copy the value from Schedule A/B	Check only one box for each exemption.							
	2013 Nissan Sentra 65000 miles Line from Schedule A/B: 3.1	\$4,152.00		\$1.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(f)(1)(i)(1)					
	Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit						
	Miscellaneous goods and	\$800.00		\$800.00	Md. Code Ann., Cts. & Jud.					
	furnishings, bed room set, kitchen set, living room set, lamps, end tables, coffee table, kitchenware, linens, bedding, sofa, chairs, etc Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	Proc. § 11-504(b)(4)					
	2 TY's, laptop, printer, alarm clock,	\$150.00		\$150.00	Md. Code Ann., Cts. & Jud.					
r t	radio, watch, cell phone, watch, refrigerator, dishwasher, microwave, toaster, washer/dryer, etc Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit	Proc. § 11-504(f)(1)(i)(1)					
	Miscellaneous clothing and wearing	\$200.00		\$200.00	Md. Code Ann., Cts. & Jud.					
	apparel, misc. shoe apparel, boots, coats, jackets, hats, pants, shorts, shirts, socks, undergarments, etc			100% of fair market value, up to any applicable statutory limit	Proc. § 11-504(b)(4)					

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Debtor 1	Ceiona K. Harris			Case number (if known)	
	of description of the property and line on needule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	nk Costume Jewelry e from Schedule A/B: 12.1	\$200.00	•	\$200.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(f)(1)(i)(1)
LIIR	e IIOIII Schedule A/B. 12.1			100% of fair market value, up to any applicable statutory limit	F100. 3 11-304(I)(I)(I)(I)
Cas	sh e from <i>Schedule A/B</i> : <b>16.1</b>	\$40.00		\$40.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(f)(1)(i)(1)
LIIR	e nom schedule A.B. 10.1			100% of fair market value, up to any applicable statutory limit	1100. 3 11 30-(1)(1)(1)(1)
	ecking: B of A Bank Account	\$37.00		\$37.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(f)(1)(i)(1)
	e from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	1100. 3 11 30-(1)(1)(1)(1)
	vings: JHU FCU Bank Account	\$25.72		\$45.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(f)(1)(i)(1)
	e from Schedule A/B: 17.2			100% of fair market value, up to any applicable statutory limit	
	ecking: JHU FCU Bank Account	\$521.00		\$521.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(f)(1)(i)(1)
	e from Schedule A/B: 17.3			100% of fair market value, up to any applicable statutory limit	
	ecking: M & T Bank Account	\$1.00		\$1.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(f)(1)(i)(1)
	e from Schedule A/B: 17.4			100% of fair market value, up to any applicable statutory limit	
	A: Millenium Retirement Acct.	\$1,640.00		\$1,640.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(h)
Liik	e nom concaule /v2. = ···			100% of fair market value, up to any applicable statutory limit	
	e you claiming a homestead exemption bject to adjustment on 4/01/22 and every			filed on or after the date of adjustme	ent.)
	No				
	Yes. Did you acquire the property cove	red by the exemption w	ithin 1	,215 days before you filed this case	?
	□ No				
	☐ Yes				

	Case	9 19-1490Z DUCT FIR	5u 04/12/	19 Page 17	<u> </u>	
Fill in this informa	ation to identify you	ır case:				
Debtor 1	Ceiona K. Harris		Last Name			
Debtor 2 (Spouse if, filing)	First Name		Last Name			
	cruptcy Court for the		2001.100			
Case number					_	if this is an ded filing
Official Form	106D					
Schedule [	): Creditors	Who Have Claims S	ecured	by Property	1	12/15
		two married people are filing together, number the entries, and attach it to this				
1. Do any creditors ha	ave claims secured by	your property?				
☐ No. Check t	his box and submit t	his form to the court with your other s	chedules. You	u have nothing else to	o report on this form.	
Yes. Fill in a	all of the information	below.				
Part 1: List All	Secured Claims					
each claim. If more th	nan one creditor has a p	nore than one secured claim, list the credito articular claim, list the other creditors in Par er according to the creditor's name.		Column A  Amount of claim  Do not deduct the value of collateral.	Column B  Value of collateral that supports this claim	Column C Unsecured portion If any
2.1 Capital One	e Auto	Describe the property that secures the	claim:	\$12,362.00	\$4,152.00	\$8,210.00
Creditor's Name		2013 Nissan Sentra 65000 mil		·		
Attn: Bankr Po Box 302		As of the date you file, the claim is: Che	eck all that			
	ity, UT 84130	apply.  Contingent				
	City, State & Zip Code	☐ Unliquidated				
Who owes the deb	t? Check one.	Disputed  Nature of lien. Check all that apply.				
■ Debtor 1 only □ Debtor 2 only		☐ An agreement you made (such as mo car loan)	rtgage or secure	ed		
Debtor 1 and Debt	or 2 only	☐ Statutory lien (such as tax lien, mecha	anic's lien)			
☐ At least one of the	,	☐ Judgment lien from a lawsuit	,			
Check if this clair community debt	m relates to a	Other (including a right to offset)	utomobile I	Loan		
	Opened 05/16 Last Active		4001			
Date debt was incurr	red 2/25/19	Last 4 digits of account number	1001			
Add the dollar value	e of your entries in Co	olumn A on this page. Write that number	here:	\$12,362	2.00	
	ige of your form, add t	he dollar value totals from all pages.		\$12,362		

#### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

		Case	19-14902 L	Joc i Filed 04	/12/19	Page 10 0	101	
Fill i	n this inform	ation to identify your c	case:					
Debt	or 1	Ceiona K. Harris						
		First Name	Middle Name	Last Nam	е			
Debt		First Name	Middle Name	Last Nam	•			
	se if, filing)				<del>J</del>			
Unite	ed States Ban	kruptcy Court for the:	DISTRICT OF MA	ARYLAND				
Case	number							
(if kno	wn)						_	if this is an led filing
Offi.	cial Form	106E/E						
		<u></u>	ho Havo IIn	socured Claim				12/15
		accurate as possible. Use					DIODITY I I I I I I I	
the Co	ontinuation Pag er (if known).	ve Claims Secured by Pro je to this page. If you have	no information to re					
		of Your PRIORITY Uns						
_	No. Go to Pai	s have priority unsecured	ciaims against you?					
_	_	11 2.						
	Yes.	priority unsecured claims.	If a craditor has more	than one priority uncocure	d claim list	the creditor congretals	for each claim. For ea	ach claim listed
io p	dentify what type lossible, list the	e of claim it is. If a claim has claims in alphabetical order ne creditor holds a particula	both priority and nong according to the cred	priority amounts, list that cl itor's name. If you have mo	aim here and	d show both priority ar	nd nonpriority amounts.	. As much as
(1	For an explanati	on of each type of claim, se	e the instructions for t	his form in the instruction I	ooklet.)			
						Total claim	Priority amount	Nonpriority amount
2.1	Comptro	ller of Maryland	Last 4 d	igits of account number	4096	\$1,045.00		\$0.00
	Priority Cred							-
	110 Carr	Admins Division	wnen w	as the debt incurred?			_	
		is, MD 21411						
		eet City State Zip Code	As of the	e date you file, the claim	is: Check al	I that apply		
	_	the debt? Check one.	☐ Conti	ngent				
	■ Debtor 1 on	ly	☐ Unliq	uidated				
	Debtor 2 on	ly	☐ Dispu	uted				
	Debtor 1 and	d Debtor 2 only		PRIORITY unsecured cla	im:			
	☐ At least one	of the debtors and another	☐ Dome	estic support obligations				
	☐ Check if thi	is claim is for a communi	ty debt Taxe	■ Taxes and certain other debts you owe the government				
	Is the claim su	bject to offset?	☐ Claim	ns for death or personal inj	ury while you	u were intoxicated		
	■ No		☐ Other	r. Specify		_		
	∏ Yes			Income Ta	xes owe	d		

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Debto	Ceiona K. Harris		Case nur	nber (if known)		
2.2	Internal Revenue Service Priority Creditor's Name	Last 4 digits of account number	4096	\$2,397.00	\$2,397.00	\$0.00
	PO Box 7346	When was the debt incurred?				
	Philadelphia, PA 19101-7346  Number Street City State Zip Code	As of the date you file, the claim i	s: Check all the	nat apply		
1	Who incurred the debt? Check one.	☐ Contingent		,		
1	Debtor 1 only	☐ Unliquidated				
ı	Debtor 2 only	Disputed				
	□ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured clai	m:			
	☐ At least one of the debtors and another	☐ Domestic support obligations				
	☐ Check if this claim is for a community debt	■ Taxes and certain other debts ye	ou owe the ao	vernment		
	Is the claim subject to offset?	☐ Claims for death or personal inju				
	■ No	Other. Specify				
I	☐ Yes	Income Ta	xes owed			
Part 2	2: List All of Your NONPRIORITY Unsecu	ırad Claims				
	o any creditors have nonpriority unsecured claims					
	_		م ما بام م			
_	No. You have nothing to report in this part. Submit t	inis form to the court with your other sc	nedules.			
	Yes.					
cla	ist all of your nonpriority unsecured claims in the aim, list the creditor separately for each claim. For ea editor holds a particular claim, list the other creditors	ch claim listed, identify what type of cla	aim it is. Do no	ot list claims already inc	luded in Part 1. If more	than one f Part 2.
4.1	Advanced Radiology Nonpriority Creditor's Name	Last 4 digits of account number	er <u>7773</u>			\$153.00
	26999 Network Place	When was the debt incurred?				
	Chicago, IL 60673-1269					
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the clai	m is: Check a	iii tnat appiy		
	Debtor 1 only	☐ Contingent				
	_	☐ Unliquidated				
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecu	red claim:			
	_	☐ Student loans				
	☐ Check if this claim is for a community debt Is the claim subject to offset?	Obligations arising out of a se report as priority claims	eparation agre	ement or divorce that ye	ou did not	
	■ No	☐ Debts to pension or profit-sha	aring plans, an	nd other similar debts		
	☐ Yes	■ Other. Specify Medical				
	Li les	Other. Specify	СХРСПЭС			
4.2	Alteon Healkth Nonpriority Creditor's Name	Last 4 digits of account number	er <u>1986</u>			\$1,425.00
	Emergency Med. Assoc. PO Box 826481	When was the debt incurred?				
	Philadelphia, PA 19182-6481	_				
	Number Street City State Zip Code	As of the date you file, the clai	m is: Check a	III that apply		
	Who incurred the debt? Check one.	☐ Contingent				
	Debtor 1 only	☐ Unliquidated				
	☐ Debtor 2 only	☐ Disputed				
	☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecu	red claim:			
	☐ At least one of the debtors and another	Student loans				
	☐ Check if this claim is for a community debt Is the claim subject to offset?	Obligations arising out of a sereport as priority claims	eparation agre	ement or divorce that ye	ou did not	
	■ No	Debts to pension or profit-sha	aring plans, an	nd other similar debts		
	☐ Yes	Other Specify Medical	•	, S dobio		
	<b>□</b> 1€5	()ther Specify Withit	EVHC1196			

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Debtor '	Ceiona K. Harris		Case number (if known)					
	Baltimore County Library Nonpriority Creditor's Name 320 York Road	Last 4 digits of account number When was the debt incurred?	1096	\$142.00				
	Towson, MD 21204  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i						
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecured	l claim:					
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not					
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts					
	Yes	■ Other. Specify Unpaid Del	ot					
	Capital One Nonpriority Creditor's Name	Last 4 digits of account number	3785	\$684.00				
	Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130	When was the debt incurred?	Opened 05/17 Last Active 2/04/18					
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply					
	Who incurred the debt? Check one.	☐ Contingent						
	Debtor 1 only	☐ Unliquidated	☐ Unliquidated					
	Debtor 2 only	Disputed						
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured	l claim:					
	At least one of the debtors and another	☐ Student loans						
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims						
	■ No	Debts to pension or profit-sharin						
	Yes	Other. Specify Credit Card						
	Credit One Bank Nonpriority Creditor's Name	Last 4 digits of account number	9724	\$932.00				
	Attn: Bankruptcy Department Po Box 98873 Las Vegas, NV 89193	When was the debt incurred?	Opened 01/17 Last Active 7/10/17					
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply					
	Who incurred the debt? Check one.	☐ Contingent						
	Debtor 1 only	☐ Unliquidated						
	☐ Debtor 2 only	☐ Disputed						
	☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:  Student loans						
	☐ At least one of the debtors and another							
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not					
	■ No	Debts to pension or profit-sharing plans, and other similar debts						
	☐ Yes	Other. Specify Credit Card	l					

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Debto	Ceiona K. Harris	Case number (if known)					
4.6	FedLoan Servicing Nonpriority Creditor's Name	Last 4 digits of account number	0019	\$74,142.00			
	Attn: Bankruptcy Po Box 69184 Harrisburg, PA 17106	When was the debt incurred?	Opened 01/18 Last Active 2/28/19				
	Number Street City State Zip Code	As of the date you file, the claim is	s: Check all that apply				
	Who incurred the debt? Check one.	☐ Contingent					
	■ Debtor 1 only	☐ Unliquidated					
	☐ Debtor 2 only	□ Disputed					
	☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured	I claim:				
	☐ At least one of the debtors and another	Student loans					
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not				
	■ No	☐ Debts to pension or profit-sharing	g plans, and other similar debts				
	☐ Yes	Other. Specify	•				
	165	Educationa	 1				
				<b>A.</b>			
4.7	First Premier Bank Nonpriority Creditor's Name	Last 4 digits of account number	2639	\$543.00			
	Attn: Bankruptcy Po Box 5524	When was the debt incurred?	Opened 12/16 Last Active 5/12/17				
	Sioux Falls, SD 57117	A contract of the state of the state of					
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is	s: Cneck all that apply				
	Debtor 1 only	☐ Contingent					
	<u> </u>	☐ Unliquidated					
	Debtor 2 only	☐ Disputed					
	☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured	I claim:				
	At least one of the debtors and another	☐ Student loans					
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims					
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	■ Other. Specify Credit Card					
4.8	Henderson-Webb, Inc Nonpriority Creditor's Name	Last 4 digits of account number	5452	\$1,633.02			
	PO Box 394 Cockeysville, MD 21030	When was the debt incurred?					
	Number Street City State Zip Code	As of the date you file, the claim is	s: Check all that apply				
	Who incurred the debt? Check one.	☐ Contingent					
	Debtor 1 only	☐ Unliquidated					
	☐ Debtor 2 only	☐ Disputed					
	☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured	l claim:				
	☐ At least one of the debtors and another	☐ Student loans					
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	■ Other. Specify Unpaid lease	se				

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Debtor	Ceiona K. Harris	Case number (if known)	
4.9	Hertz Processing Nonpriority Creditor's Name	Last 4 digits of account number 0876	\$30.00
	PO Box 659949	When was the debt incurred?	
	Saint Louis, MO 63195-6649		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent	
	■ Debtor 1 only	☐ Unliquidated	
	Debtor 2 only	<u> </u>	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:  ☐ Student loans	
	☐ Check if this claim is for a community debt		
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Unpaid Speeding Fine	
4.10	Liberty Mutual Insurance	Last 4 digits of account number 5275	\$132.00
	Nonpriority Creditor's Name		
	P.O. Box 8400	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	_	☐ Unliquidated	
	☐ Debtor 2 only	☐ Disputed	
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another	☐ Student loans	
	☐ Check if this claim is for a community debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Unpaid Debt	
4.11	LVNV Funding/Resurgent Capital	Last 4 digits of account number 9724	\$931.00
	Nonpriority Creditor's Name	<del></del>	<u> </u>
	Attn: Bankruptcy	When was the debt incurred? Opened 03/18	
	Po Box 10497		
	Greenville, SC 29603  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
		Disputed	
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	☐ Student loans	
	☐ Check if this claim is for a community debt	$\square$ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Factoring Company Account Credit One Bank N.A.	

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Debtor	1 Ceiona K. Harris		Case number (if known)	
4.12	LVNV Funding/Resurgent Capital Nonpriority Creditor's Name	Last 4 digits of account number	0820	\$479.00
	Attn: Bankruptcy Po Box 10497 Greenville, SC 29603	When was the debt incurred?	Opened 09/18	
	Number Street City State Zip Code	As of the date you file, the claim is	s: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent		
	■ Debtor 1 only	☐ Unliquidated		
	Debtor 2 only	☐ Disputed		
	☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured	l claim:	
	☐ At least one of the debtors and another	☐ Student loans		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	■ Other. Specify Factoring ( N.A.	Company Account Capital One	
4.13	Midland Funding	Last 4 digits of account number	7279	\$413.00
	Nonpriority Creditor's Name 2365 Northside Dr Ste 300 San Diego, CA 92108	When was the debt incurred?	Opened 12/14	
	Number Street City State Zip Code	As of the date you file, the claim is	s: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent		
	■ Debtor 1 only	☐ Unliquidated		
	Debtor 2 only	☐ Disputed		
	☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured	l claim:	
	At least one of the debtors and another	☐ Student loans		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	■ Other. Specify Bank	Company Account Synchrony	
4.14	Midland Funding	Last 4 digits of account number	0065	\$324.00
	Nonpriority Creditor's Name 2365 Northside Dr Ste 300 San Diego, CA 92108	When was the debt incurred?	Opened 11/14	
	Number Street City State Zip Code	As of the date you file, the claim is	s: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent		
	Debtor 1 only	☐ Unliquidated		
	Debtor 2 only	☐ Disputed		
	☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured	l claim:	
	☐ At least one of the debtors and another	☐ Student loans		
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	☐ Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Factoring (Bank	Company Account Synchrony	

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Debtor	1 Ceiona K. Harris		Case number (if known)	
4.15	MKR Real Estate, LLC Nonpriority Creditor's Name	Last 4 digits of account number	4096	\$2,563.00
	2212 Old Court Rd. Pikesville, MD 21208	When was the debt incurred?		
	Number Street City State Zip Code	As of the date you file, the claim is	s: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent		
	■ Debtor 1 only	☐ Unliquidated		
	Debtor 2 only	<u> </u>		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured	claim:	
	☐ At least one of the debtors and another	☐ Student loans	ciaiii.	
	☐ Check if this claim is for a community debt	Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing	•	
	Yes	Other. Specify Unpaid least	se	
4.16	Professional Account Management	Last 4 digits of account number	4274	\$552.00
	Nonpriority Creditor's Name			•
	P.O. Box 37038	When was the debt incurred?		
	Washington, DC 20013  Number Street City State Zip Code	As of the date you file, the claim is	s: Check all that apply	
	Who incurred the debt? Check one.	_	,	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured  ☐ Student loans	claim:	
	☐ Check if this claim is for a community debt			
	Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other Specify Parking vio	•	
4.17	Progressive Leasing	Last 4 digits of account number	3264	\$815.00
	Nonpriority Creditor's Name 256 West Data Drive	When was the debt incurred?		
	Draper, UT 84020			
	Number Street City State Zip Code	As of the date you file, the claim is	s: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent		
	Debtor 1 only	☐ Unliquidated		
	Debtor 2 only	☐ Disputed		
	☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured	claim:	
	☐ At least one of the debtors and another	☐ Student loans		
	☐ Check if this claim is for a community debt	_	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Unpaid lease	se	

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Debtor	1 Ceiona K. Harris		Case number (if known)	
4.18	Quest Diagnostic	Last 4 digits of account number	3827	\$30.00
	Nonpriority Creditor's Name 1901 Sulpher Spring Road Halethorpe, MD 21227	When was the debt incurred?		
	Number Street City State Zip Code	As of the date you file, the claim is	s: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent		
	Debtor 1 only	☐ Unliquidated		
	Debtor 2 only	☐ Disputed		
	☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured	l claim:	
	☐ At least one of the debtors and another	☐ Student loans		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Medical ex	pense	
4.19	QVC	Last 4 digits of account number	4096	\$53.00
	Nonpriority Creditor's Name 100 QVC Boulevard Rocky Mount, NC 27815	When was the debt incurred?		
	Number Street City State Zip Code	As of the date you file, the claim is	s: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent		
	Debtor 1 only	☐ Unliquidated		
	☐ Debtor 2 only	☐ Disputed		
	☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured	l claim:	
	☐ At least one of the debtors and another	☐ Student loans		
	☐ Check if this claim is for a community debt	Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	, <u>-</u>	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Unpaid Del	ot	
4.20	Receivable Management Inc	Last 4 digits of account number	9438	\$1,671.00
	Nonpriority Creditor's Name 7206 Hull Rd Ste 211	When was the debt incurred?	Opened 11/13 Last Active 10/03/12	
	Richmond, VA 23235  Number Street City State Zip Code	As of the date you file, the claim is	s: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent		
	Debtor 1 only	☐ Unliquidated		
	Debtor 2 only	☐ Disputed		
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured	l claim:	
	At least one of the debtors and another	☐ Student loans		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharing		
	Yes	Other. Specify Collection	Attorney Patient First	

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Debtor	1 Ceiona K. Harris		Case number (if known)	
4.21	Receivable Management Inc	Last 4 digits of account number	2671	\$612.00
	Nonpriority Creditor's Name 7206 Hull Rd	When was the debt incurred?	Opened 02/14	
	Ste 211		_	
	Richmond, VA 23235  Number Street City State Zip Code	As of the date you file, the claim	is. Chock all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim	s. Check all that apply	
	■ Debtor 1 only	☐ Contingent		
		☐ Unliquidated		
	Debtor 2 only	☐ Disputed		
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecure	d claim:	
	At least one of the debtors and another	☐ Student loans		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify Collection	Attorney Patient First	
4.22	University of MD St Joseph Med Ctr	Last 4 digits of account number	2259	\$388.00
	Nonpriority Creditor's Name	MI		
	PO Box 824778 Philadelphia, PA 19182-4778	When was the debt incurred?		
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent		
	Debtor 1 only	☐ Unliquidated		
	Debtor 2 only	☐ Disputed		
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecure	d claim:	
	At least one of the debtors and another	☐ Student loans		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify Medical ex	pense	
4.23	Visa Bank/Macy's	Last 4 digits of account number	1380	\$352.00
	Nonpriority Creditor's Name	-		********
	Attn: Bankruptcy	When we do do do to see all 2	Opened 09/13 Last Active 4/25/14	
	Po Box 8053 Mason, OH 45040	When was the debt incurred?	4/25/14	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent		
	■ Debtor 1 only			
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecure	d claim:	
	☐ At least one of the debtors and another	☐ Student loans		
	☐ Check if this claim is for a community debt		aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	ag. 555 or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	☐ Yes	■ Other. Specify Charge Ac	count	
Part 3:	List Others to Be Notified About a Debt	That You Already Listed		
	is page only if you have others to be notified about		ou already listed in Parts 1 or 2. For example, if a	collection agency is
trying more	is page only if you have others to be notified about to collect from you for a debt you owe to someon than one creditor for any of the debts that you list ebts in Parts 1 or 2, do not fill out or submit this p	e else, list the original creditor in Pa ed in Parts 1 or 2, list the additional	rts 1 or 2, then list the collection agency here. S	imilarly, if you have
-	·	n which entry in Part 1 or Part 2 did you	list the original creditor?	
		ne <u><b>4.15</b></u> of ( <i>Check one</i> ):	Part 1: Creditors with Priority Unsecured Claims	
400 R	edland Ct., Ste. 212		Part 2: Creditors with Nonpriority Unsecured Clai	ms

Owings Mills, MD 21117

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Official Form 106 E/F

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Debtor 1 Ceiona K. Harris		Case number (if known)
	Last 4 digits of account number	
Name and Address Caine & Weiner 1005 Ford Rd. Dallas, TX 75234	On which entry in Part 1 or Part 2 did the time 4.17 of (Check one):	you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
Dalias, 17 75254	Last 4 digits of account number	
Name and Address Credit Collection Service	On which entry in Part 1 or Part 2 did the Line 4.10 of (Check one):	you list the original creditor?  ☐ Part 1: Creditors with Priority Unsecured Claims
725 Canton Street Norwood, MA 02062	Last 4 digits of account number	■ Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Credit Control 5757 Phantom Drive, Suite 330 Hazelwood, MO 63042	On which entry in Part 1 or Part 2 did the Line 4.12 of (Check one):	you list the original creditor?  □ Part 1: Creditors with Priority Unsecured Claims  ■ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address District of Columbia Traffic Enforcement Office P.O.Box 37075 Washington, DC 20013	On which entry in Part 1 or Part 2 did the Line 4.16 of (Check one):	you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Internal Revenue Service 31 Hopkins Plaza Room 1150 Baltimore, MD 21201	On which entry in Part 1 or Part 2 did the Line <b>2.2</b> of ( <i>Check one</i> ):	you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Penn Credit 916 S. 14th PO Box 988	On which entry in Part 1 or Part 2 did the Line <b>2.1</b> of ( <i>Check one</i> ):	you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
Harrisburg, PA 17108	Last 4 digits of account number	
Name and Address Peroutka, Miller, Klima & Peters	On which entry in Part 1 or Part 2 did the Line 4.5 of (Check one):	you list the original creditor?  ☐ Part 1: Creditors with Priority Unsecured Claims
8028 Ritchie Highway, Suite 300 Pasadena, MD 21122	Last 4 digits of account number	■ Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?
State of Maryland Comptroller of the Treasury 301 W. Preston Street, Room 410	Line <u>2.1</u> of ( <i>Check one</i> ):	■ Part 1: Creditors with Priority Unsecured Claims □ Part 2: Creditors with Nonpriority Unsecured Claims
Baltimore, MD 21201	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?
State of Maryland Central Collection Unit 300 W. Preston St., Rm. 407 Baltimore, MD 21201	Line <u><b>2.1</b></u> of ( <i>Check one</i> ):	■ Part 1: Creditors with Priority Unsecured Claims □ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Synchrony Bank Po Box 960061	On which entry in Part 1 or Part 2 did Line 4.13 of (Check one):	Part 1: Creditors with Priority Unsecured Claims
Orlando, FL 32896	Last 4 digits of account number	■ Part 2: Creditors with Nonpriority Unsecured Claims

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

<sup>6.</sup> Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

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#### Debtor 1 Ceiona K. Harris

#### Case number (if known)

					Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
otal claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	3.442.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ —	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	3,442.00
					Total Claim
	6f.	Student loans	6f.	\$	Total Claim <b>74,142.00</b>
	•		6f.	\$	
	6f. 6g.	Obligations arising out of a separation agreement or divorce that you	6f. 6g.	\$	
	•			· —	74,142.00
otal claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. 6h.	· —	74,142.00 0.00

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Fill in this infor	mation to identify your	case:		
Debtor 1	Ceiona K. Harris			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF MARYLA	ND	
Case number				
(if known)				☐ Check if this is an
				amended filing

#### Official Form 106G

## **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

2.1 Landlord Residential Tenant Lease, Debtor as Lessee

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Fill in this	information to identify your	case:			
Debtor 1	Ceiona K. Harris				
Dobtor 2	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fili	ng) First Name	Middle Name	Last Name		
United Sta	tes Bankruptcy Court for the:	DISTRICT OF MARYLA	ND		
Case num	ber				
(if known)					Check if this is an amended filing
Officia	l Form 106H			•	
	lule H: Your Cod	obtors			10/15
Scried	iule n. Tour Cou	enroi 2			12/15
	and case number (if known)	•		e as a codebtor.	
■ No	3				
	hin the last 8 years, have you a, California, Idaho, Louisiana				rty states and territories include
■ No.	Go to line 3.			•	
☐ Yes	s. Did your spouse, former spo	use, or legal equivalent liv	e with you at the time?		
in line Form	2 again as a codebtor only	if that person is a guarar	ntor or cosigner. Make	sure you have listed	ng with you. List the person show the creditor on Schedule D (Officia , Schedule E/F, or Schedule G to
	Column 1: Your codebtor Name, Number, Street, City, State and Z	IP Code		Column 2: The cre Check all schedul	editor to whom you owe the debt es that apply:
3.1				☐ Schedule D, lir	ne
	Name			☐ Schedule E/F,	
				☐ Schedule G, lir	ne
	Number Street City	State	ZIP Code	_	
3.2				☐ Schedule D, lir	00
	Name			Schedule E/F,	
				☐ Schedule G, lir	ne
	Number Street	State	ZIP Code		
	CILV	SIGIE	ZIP Code		

	in this information										
Deb	otor 1	Ceiona K. H	arris			_					
	otor 2 ouse, if filing)					_					
Uni	ted States Bankru	ptcy Court for the	: DISTRICT OF MARY	LAND		_					
	se number								ed filing ent showin	g postpetitior	
0	fficial Form	106 <u>l</u>						MM / DD/	YYYY		
S	chedule I:	Your Inc	ome					, 22,			12/1
spo	use. If you are se ch a separate she	parated and you eet to this form. be Employment	are married and not fili r spouse is not filing w On the top of any additi	ith you, do not inclu	ide infor	mat	ion abo	ut your sp	ouse. If m	ore space is	needed,
١.	information.	noyment		Debtor 1				Debtor	2 or non-fi	iling spouse	
	If you have more attach a separate		Employment status	■ Employed				☐ Emp	•		
	information about employers.			☐ Not employed				⊔ Not €	employed		
	Include part-time	s coaconal or	Occupation	Postal Worker							
	self-employed w		Employer's name	USPS Disbursir	ng Offic	er					
	Occupation may or homemaker, i		Employer's address	Accounting Ser 2825 Lone Oak Saint Paul, MN	Pkwy						
			How long employed to	here? 3 mont	hs			_			
Par	t 2: Give De	etails About Mor	nthly Income								
	mate monthly incuse unless you are		ate you file this form. If	you have nothing to I	eport for	any	line, wr	ite \$0 in th	e space. In	nclude your no	on-filing
,	u or your non-filing e space, attach a s	, ,	ore than one employer, co	ombine the information	on for all	emp	loyers fo	or that pers	son on the l	lines below. If	f you need
							For De	ebtor 1		btor 2 or ing spouse	
2.			ry, and commissions (b calculate what the month		2.	\$	:	2,877.34	\$	N/A	
3.	Estimate and lis	st monthly overt	ime pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross	Income. Add lir	ne 2 + line 3.		4.	\$	2,8	377.34	\$	N/A	

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Debt	or 1	Ceiona K. Harris		Case r	number (if known)		
				For	Debtor 1	For Deb	tor 2 or
	Cop	by line 4 here	4.	\$	2,877.34	\$	N/A
5.	Lice	t all payroll deductions:					
J.	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	299.34	\$	N/A
	5a. 5b.	Mandatory contributions for retirement plans	5a. 5b.	<b>\$</b> —	0.00	\$	N/A
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	N/A
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	N/A
	5e.	Insurance	5e.	\$	120.00	\$	N/A
	5f.	Domestic support obligations	5f.	\$	0.00	\$	N/A
	5g.	Union dues	5g.	\$	0.00	\$	N/A
	5h.	Other deductions. Specify:	_ 5h.+	\$	0.00	+ \$	N/A
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	419.34	\$	N/A
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	2,458.00	\$	N/A
8.	List 8a.	t all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total					
		monthly net income.	8a.	\$	0.00	\$	N/A
	8b.	Interest and dividends	8b.	\$	0.00	\$	N/A
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.		\$	0.00	\$	N/A
	8d.	Unemployment compensation	8c. 8d.	\$ 	0.00	\$	N/A
	8e.	Social Security	8e.	<b>\$</b> —	0.00	\$	N/A
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	e 8f.	\$	0.00	\$	N/A
	8g.	Pension or retirement income	 8g.	\$	0.00	\$	N/A
	8h.	Other monthly income. Specify:	8h.+	\$	0.00	+ \$	N/A
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	N/A
10.	Cal	culate monthly income. Add line 7 + line 9.	10. \$	2	2,458.00 + \$	N,	/A = \$ 2,458.00
	Add	I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.					
11.	othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not acify:	depen		•	ed in <i>Sche</i>	dule J. 1. +\$ 0.00
12.		It the amount in the last column of line 10 to the amount in line 11. The restet that amount on the Summary of Schedules and Statistical Summary of Certallies				a, if it	2. \$ <b>2,458.00</b>
							Combined
13.	Do	you expect an increase or decrease within the year after you file this form	?				monthly income
		No. Yes. Explain:					
	П	I CO. LAVIGIII.					

Official Form 106I Schedule I: Your Income page 2

Eill	in this informa	tion to identify yo	our case.						
	otor 1					Ch	a alo if this is.		
Dep	OLOT 1	Ceiona K. Ha	arris			Cn	eck if this is: An amended fi	ling	
1	otor 2							showing postpetition chapte s of the following date:	ər
(Spc	ouse, if filing)						·		
Unit	ed States Bankr	uptcy Court for the:	DISTRI	CT OF MARYLAND			MM / DD / YYY	ſΥ	
	e number nown)								
O	fficial Fo	rm 106J				_			
S	chedule	J: Your	Exper	ises				1:	2/15
Be info	as complete a	and accurate as	possible eded, atta	. If two married people ich another sheet to th				ole for supplying correct rite your name and case	
Par		ibe Your House	hold						
1.	Is this a joir								
	■ No. Go to		in a sonar	ate household?					
	□ res. Doe		iii a sepai	ate nousenous					
			st file Offic	ial Form 106J-2, Expens	ses for Separate Hous	sehold of D	ebtor 2.		
2.	Do you have	e dependents?	□ No						
	Do not list D and Debtor 2		Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	S Does dependent live with you?	
	Do not state	the						□ No	
	dependents	names.			Daughter		<u>9</u>	■ Yes	
								□ No □ Yes	
								□ res □ No	
								☐ Yes	
								□ No	
_	_								
3.	expenses of	enses include f people other t d your depende	han $_{m  au}$	No Yes					
		ate Your Ongoi							
exp	imate your ex enses as of a plicable date.	penses as of year date after the l	our bankri bankrupto	uptcy filing date unless y is filed. If this is a su	s you are using this pplemental <i>Schedul</i>	form as a le J, check	supplement in a the box at the t	Chapter 13 case to report op of the form and fill in the	rt the
				government assistanc					
	value of sucl ficial Form 10		d have ind	cluded it on <i>Schedule l</i>	: Your Income		Your	expenses	
4.		or home owners and any rent for th		ses for your residence or lot.	. Include first mortgaç	ge 4.	\$	769.00	
	If not includ	led in line 4:							
	4a. Real e	estate taxes				4a.	\$	0.00	
	4b. Prope	rty, homeowner's				4b.	·	0.00	
				upkeep expenses		4c.		10.00	
5		owner's associat		dominium dues our residence, such as l	homo oquity loons	4d. 5.		0.00	
5.	Auditional f	nortyaye payme	ante for yo	our residerice, such as	nome equity loans	Э.	Ψ	0.00	

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ebtor 1 <u>Ceiona</u>	a K. Harris	Case num	ber (if known)	-
1 14:11:41				
. <b>Utilities:</b> 6a. Electrici	ity, heat, natural gas	6a.	\$	130.00
	sewer, garbage collection	6b.		20.00
	one, cell phone, Internet, satellite, and cable services	6c.		
	· · · · · · · · · · · · · · · · · · ·	6d.		250.00
6d. Other. S	• •		· .	0.00
	usekeeping supplies	7.	·	200.00
	d children's education costs	8.	·	0.00
_	ndry, and dry cleaning	9.		15.00
Personal care	e products and services	10.	\$	15.00
. Medical and o	dental expenses	11.	\$	10.00
	n. Include gas, maintenance, bus or train fare.	40	•	150.00
	car payments.	12.		
	t, clubs, recreation, newspapers, magazines, and books			0.00
. Charitable co	ntributions and religious donations	14.	\$	0.00
. Insurance.			·	
	insurance deducted from your pay or included in lines 4 or 2			
15a. Life insu	urance	15a.	\$	0.00
15b. Health in	nsurance	15b.	\$	80.00
15c. Vehicle	insurance	15c.	\$	450.00
15d. Other in	surance. Specify:	15d.	\$	0.00
	include taxes deducted from your pay or included in lines 4		• —	
Specify:	infolded taxes deducted from your pay of moldaed in lines 4	16.	\$	0.00
· · · · <u> </u>	r lease payments:		<u> </u>	0.00
	ments for Vehicle 1	17a.	\$	345.00
, ,	ments for Vehicle 2	17b.		0.00
17c. Other. S		17c.	· -	0.00
			·	
17d. Other. S		17d.	Ф	0.00
	ts of alimony, maintenance, and support that you did no		\$	0.00
Other paymer	m your pay on line 5, <i>Schedule I, Your Income</i> (Official Fo nts you make to support others who do not live with you	JIIII 1001 <i>j</i> .	\$	
	its you make to support others who do not live with you		Ψ	0.00
Specify:	and the second s	19.	/ <b>/</b>	
	operty expenses not included in lines 4 or 5 of this form			0.00
	ges on other property	20a.		0.00
20b. Real est		20b.		0.00
	y, homeowner's, or renter's insurance	20c.	·	0.00
	ance, repair, and upkeep expenses	20d.	\$	0.00
20e. Homeov	wner's association or condominium dues	20e.	\$	0.00
. Other: Specify	<i>y</i> :	21.	+\$	0.00
	· ·		·	3.30
	r monthly expenses			
22a. Add lines	S .		\$	2,444.00
22b. Copy line	22 (monthly expenses for Debtor 2), if any, from Official For	m 106J-2	\$	
22c. Add line 2	22a and 22b. The result is your monthly expenses.		\$	2,444.00
•	r monthly net income.			
	ne 12 (your combined monthly income) from Schedule I.	23a.	\$	2,458.00
23b. Copy yo	our monthly expenses from line 22c above.	23b.	-\$	2,444.00
	•			,
23c. Subtract	t your monthly expenses from your monthly income.			44.55
	ult is your monthly net income.	23c.	\$	14.00
	et an increase or decrease in your expenses within the year			an or doorooon because -f -
	you expect to finish paying for your car loan within the year or do you ene terms of your mortgage?	expect your mortgage pa	ayınent to increa	se or decrease because of a
	ie teimo oi your mortgage?			
No.				
☐ Yes.	Explain here:			

					-	
Fill in this info	ormation to identify your	case:				
Debtor 1	Ceiona K. Harris					
	First Name	Middle Name	Las	t Name		
Debtor 2	F N	- Artin M				
(Spouse if, filing)	First Name	Middle Name	Las	t Name		
United States E	Bankruptcy Court for the:	DISTRICT OF MARYLAND	)			
Case number						
(if known)					☐ Check if this is an	
					amended filing	
O#:=:=!	100Daa					
	rm 106Dec					
Declara	ition About a	ın Individual D	Debto	or's Schedules	12/15	
If two married	people are filing togethe	r, both are equally respons	ible for s	supplying correct information.		
You must file th	his form whenever you fi	le bankruptcy schedules o	r amend	ed schedules. Making a false st	atement, concealing property, or	
obtaining mone	ey or property by fraud in	n connection with a bankru			,000, or imprisonment for up to 20	
years, or both.	18 U.S.C. §§ 152, 1341, 1	.519, and 3571.				
C:	an Balau					
31	gn Below					
Did you p	pay or agree to pay some	one who is NOT an attorne	y to help	you fill out bankruptcy forms?		
, ,	, , ,			, , ,		
■ No						
☐ Yes.	Name of person	ankruptcy Petition Preparer's Notice,				
				Declaration	on, and Signature (Official Form 119)	
Under pen	alty of perjury, I declare	that I have read the summa	ary and s	schedules filed with this declara	ation and	
that they a	are true and correct.		•			
X /s/ Ce	eiona K. Harris		Х			
	na K. Harris		_ ^	Signature of Debtor 2		
	ture of Debtor 1			Š		
Doto	A			Data		
Date <b>April 12, 2019</b>				Date		

Fi	ll in this inforn	nation to identify you	r case:								
Debtor 1		Ceiona K. Harris									
De	ebtor 2	First Name	Middle Name	Last Name							
1 '	ouse if, filing)	First Name	Middle Name	Last Name							
Ur	nited States Ba	nkruptcy Court for the:	DISTRICT OF MARYLAN	D							
Ca	ase number										
(if known)					_	Check if this is an amended filing					
_	<u>fficial Fo</u>										
St	atement	of Financial	Affairs for Individ	luals Filing for B	ankruptcy	4/19					
					e equally responsible for sup ny additional pages, write yo						
nui	mber (if know	n). Answer every que	stion.								
Pa	rt 1: Give D	Details About Your Ma	arital Status and Where You	Lived Before							
1.	What is you	r current marital statu	ıs?								
	<ul><li>☐ Married</li><li>■ Not mar</li></ul>	ried									
2.	During the la	the last 3 years, have you lived anywhere other than where you live now?									
	■ No	No.									
	_	No Yes. List all of the places you lived in the last 3 years. Do not include where you live now.									
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ac	Idress:	Dates Debtor 2 lived there					
3.					nity property state or territor						
sta	tes and territori	ies include Arizona, Ca	alifornia, Idaho, Louisiana, Ne	vada, New Mexico, Puerto R	tico, Texas, Washington and N	Visconsin.)					
	■ No										
	☐ Yes. Ma	ake sure you fill out Sci	hedule H: Your Codebtors (Of	fficial Form 106H).							
Pa	rt 2 Explai	n the Sources of You	ır Income								
4.	Fill in the tota	al amount of income yo	ou received from all jobs and a	all businesses, including par		ndar years?					
	ii you are iiiii	ig a joint case and you	have income that you receive	e together, list it offly office u	nder Deblor 1.						
	□ No										
	■ Yes. Fill	in the details.									
			Debtor 1		Debtor 2						
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)					
From January 1 of current year until the date you filed for bankruptcy:			■ Wages, commissions, bonuses, tips	\$9,822.05	☐ Wages, commissions, bonuses, tips						
			☐ Operating a business		☐ Operating a business						

Official Form 107

Debtor 1 Ceiona K. Harris			Case number (if known)									
					Debtor 1					Debtor 2		
					Sources of Check all th		(bef	oss income fore deductions lusions)	and	Sources of inc Check all that a		Gross income (before deductions and exclusions)
			dar year: December :	31, 2018 )	■ Wages, bonuses, ti	commissions,		\$39,255	5.00	☐ Wages, combonuses, tips	imissions,	
					☐ Operatir	ng a business				☐ Operating a	business	
			ar year bef December :		■ Wages, bonuses, ti	commissions,		\$48,483	3.00	☐ Wages, combonuses, tips	imissions,	
					☐ Operatir	ng a business				☐ Operating a	business	
9	gambli _ist ea ■ N	ng a ch s o	nd lottery w	vinnings. If yo	ou are filing a	joint case and y	ou hav	e income that yo	ou rece	s, money conecte ived together, list	it only once	uits; royalties; and under Debtor 1.
					Debtor 1					Debtor 2		
					Sources of Describe be		eac (bef	oss income from th source fore deductions lusions)		Sources of inc Describe below		Gross income (before deductions and exclusions)
Part	3: I	List	Certain Pa	yments You	Made Before	e You Filed for	Bankr	uptcy				
_	□ N	o. es.	Neither De individual puring the No. Yes	position 1 nor Experimentally for a graph of the following paid that crunot include to adjustmentally for Debtor 2 of 90 days before the following paid to line 7	personal, far personal, far pe	mily, or househo or bankruptcy, d to whom you pa t include paymer an attorney for t and every 3 year primarily consu or bankruptcy, d	umer d bld purp lid you   id a tot nts for this bar rs after umer d id you	debts. Consume cose."  pay any creditor  al of \$6,825* or domestic supponkruptcy case.  that for cases filebts.  pay any creditor	more ir rt obligatiled on a	of \$6,825* or more parations, such as cloor after the date of	ore?  yments and the support and the support and adjustments?	1(8) as "incurred by an the total amount you and alimony. Also, do t.
			. 33	include pay		mestic support o						include payments to
	Credi	tor's	Name and	d Address		Dates of payme	ent	Total amou pa	ınt aid	Amount you still owe	Was this p	payment for

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Case number (if known)

7.	Within 1 year before you filed for bankrup Insiders include your relatives; any general posteriors of which you are an officer, direct including one for a business you operate as a support and alimony.	artners; relatives of any ger ctor, person in control, or o	neral partners; partner wner of 20% or more	erships of which yes of their voting se	ou are a general partner; curities; and any managing agent,
	■ No				
	☐ Yes. List all payments to an insider.				
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
8.	Within 1 year before you filed for bankrup insider? Include payments on debts guaranteed or co		ments or transfer a	any property on a	account of a debt that benefited an
	■ No				
	Yes. List all payments to an insider	D-11	T-1-1	<b>A</b>	Dance for this warment
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
Pa	rt 4: Identify Legal Actions, Repossessio	ns, and Foreclosures			
9.	Within 1 year before you filed for bankrup List all such matters, including personal injury modifications, and contract disputes.  No Yes. Fill in the details.				
	Case title Case number	Nature of the case	Court or agency		Status of the case
	(MKR REAL ESTATE LLC) Vs:(HARRIS, CEIONA) Type: REGULAR CLAIM Complaint Status: JUDGMENT IN FAVOR OF PLAINTIFF ENTERED Status Date: 11/17/2014 Amount \$2131.99	DISTRICT COURT FOR BALTIMORE CITY - CIVIL SYSTEM Case Number: 010100057642014 Claim Type: CONTRACT Filing Date: 03/19/2014 Case Status: ACTIVE			☐ Pending ☐ On appeal ☐ Concluded
	DISTRICT COURT FOR PRINCE GEORGE'S COUNTY - CIVIL SYSTEM Case Number: 050200068142019 Claim Type:CONTRACT	(LVNV FUNDING LLC) Vs:(HARRIS, CEIONA) REGULAR CLAIM Complaint Status: ACTIVE Status Date: 03/06/2019 Filing Date: 03/05/2019 Amount \$931.51 Last Activity Date: 03/06/2019			☐ Pending ☐ On appeal ☐ Concluded

Debtor 1 Ceiona K. Harris

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Case number (if known)

10.	Within 1 year before you filed for bankrup Check all that apply and fill in the details bel	otcy, was any of your property repossessed, foreclose ow.	d, garnished, attache	d, seized, or levied?
	<ul><li>No. Go to line 11.</li><li>Yes. Fill in the information below.</li></ul>			
	Creditor Name and Address	Describe the Property	Date	Value of the property
		Explain what happened		
11.	Within 90 days before you filed for bankry accounts or refuse to make a payment be  No  Yes. Fill in the details.	uptcy, did any creditor, including a bank or financial in cause you owed a debt?	nstitution, set off any	amounts from your
	Creditor Name and Address	Describe the action the creditor took	Date action was taken	Amount
12.	Within 1 year before you filed for bankrup court-appointed receiver, a custodian, or ■ No □ Yes	otcy, was any of your property in the possession of an another official?	assignee for the ben	efit of creditors, a
Par	t 5: List Certain Gifts and Contributions	3		
13.	Within 2 years before you filed for bankru  ■ No □ Yes. Fill in the details for each gift.	ptcy, did you give any gifts with a total value of more	than \$600 per persor	?
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:			
14.	Within 2 years before you filed for bankru  No  Yes. Fill in the details for each gift or co	ptcy, did you give any gifts or contributions with a to	tal value of more thar	\$600 to any charity?
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	Describe what you contributed	Dates you contributed	Value
Par	t 6: List Certain Losses			
15.	Within 1 year before you filed for bankrup disaster, or gambling?	otcy or since you filed for bankruptcy, did you lose any	thing because of the	ft, fire, other
	■ No □ Yes. Fill in the details.			
	how the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost

Debtor 1 Ceiona K. Harris

Debtor 1 Ceiona K. Harris Case number (if known)

Par	List Certain Payments or Transfers						
16.	Within 1 year before you filed for bankrupto consulted about seeking bankruptcy or pre Include any attorneys, bankruptcy petition pre	parir	ng a bankruptcy pe	tition?			rty to anyone you
	□ No						
	Yes. Fill in the details.						
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	ı	Description and transferred	value of any prope	erty	Date payment or transfer was made	Amount of payment
	Jeffrey M. Sirody and Associates 1777 Reisterstown Road Suite 360 East Pikesville, MD 21208 smeyers5@hotmail.com		Attorney's Fee- Filing Fee \$ 3				\$1,335.00
17.	Within 1 year before you filed for bankrupto promised to help you deal with your credite. Do not include any payment or transfer that you	ors o	r to make payment			or transfer any prope	rty to anyone who
	Yes. Fill in the details.						
	Person Who Was Paid Address		Description and transferred	value of any prope	erty	Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bankrup transferred in the ordinary course of your killing like include both outright transfers and transfers minclude gifts and transfers that you have already	ousin nade a	ess or financial aff as security (such as	airs? the granting of a se			
	No						
	Yes. Fill in the details.						
	Person Who Received Transfer Address		Description and property transfer			any property or received or debts change	Date transfer was made
	Person's relationship to you						
19.	Within 10 years before you filed for bankru beneficiary? (These are often called asset-pr			ny property to a se	elf-settled tru	ust or similar device	of which you are a
	Yes. Fill in the details.		5				<b>5.7</b>
	Name of trust		Description and	value of the prope	rty transterr	ed	Date Transfer was made
Par	List of Certain Financial Accounts, In	strur	nents, Safe Depos	it Boxes, and Stor	age Units		
20.	Within 1 year before you filed for bankrupto sold, moved, or transferred? Include checking, savings, money market, houses, pension funds, cooperatives, asso	or ot	her financial accou	ınts; certificates o			
	No	, s.au	J G. 1116				
	Yes. Fill in the details.						
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)		st 4 digits of count number	Type of account instrument	clo	te account was sed, sold, oved, or nsferred	Last balance before closing or transfer

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Deb	tor 1	Ceiona K. Harris		Case number (if known)	
21.	•	ou now have, or did you have within 1 year , or other valuables?	before you filed for bankruptcy, a	ny safe deposit box or other deposit	ory for securities,
		No			
	_	Yes. Fill in the details.			
		ne of Financial Institution ress (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
22.	Have	you stored property in a storage unit or pl	ace other than your home within 1	year before you filed for bankruptcy	?
		No			
		Yes. Fill in the details.			
		ne of Storage Facility ress (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
Par	9:	Identify Property You Hold or Control for	Someone Else		
		ou hold or control any property that someo omeone.	one else owns? Include any proper	ty you borrowed from, are storing fo	r, or hold in trust
	_	No Yes. Fill in the details.			
	-	ner's Name ress (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value
Par	10:	Give Details About Environmental Informa	ation		
For t	he p	urpose of Part 10, the following definitions	apply:		
	toxic	ronmental law means any federal, state, or substances, wastes, or material into the a lations controlling the cleanup of these sul	ir, land, soil, surface water, ground		
		means any location, facility, or property as vn, operate, or utilize it, including disposal		law, whether you now own, operate,	or utilize it or used
		ardous material means anything an environ rdous material, pollutant, contaminant, or s		s waste, hazardous substance, toxic	substance,
Repo	ort all	notices, releases, and proceedings that yo	ou know about, regardless of wher	n they occurred.	
24.	Has	any governmental unit notified you that you	u may be liable or potentially liable	under or in violation of an environm	nental law?
		No			
	_	Yes. Fill in the details.			
		ne of site ress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
25.	Have	you notified any governmental unit of any	release of hazardous material?		
		No			
		Yes. Fill in the details.			
		ne of site ress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
			•		

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Case number (if known)

26.	Hav	ve you been a party in any judicial or ad No Yes. Fill in the details.	dministrative proceeding under any e	enviror	nmental law? Include settle	ements and orders.
		se Title se Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ature of the case	Status of the case
Pa	rt 11:	Give Details About Your Business of	r Connections to Any Business			
27.	Wit	hin 4 years before you filed for bankrup	ptcy, did you own a business or have	any o	of the following connection	s to any business?
		☐ A sole proprietor or self-employed	l in a trade, profession, or other activ	ity, eit	her full-time or part-time	
		☐ A member of a limited liability com	npany (LLC) or limited liability partne	rship (	(LLP)	
		☐ A partner in a partnership				
		☐ An officer, director, or managing e	executive of a corporation			
		☐ An owner of at least 5% of the voti	ing or equity securities of a corporati	ion		
		No. None of the above applies. Go to	) Part 12.			
		Yes. Check all that apply above and fi		ess.		
	Bu	siness Name dress	Describe the nature of the busines	SS	Employer Identification Do not include Social Se	
	(Nu	mber, Street, City, State and ZIP Code)	Name of accountant or bookkeepe	er	Dates business existed	
	■ Na Ad	No Yes. Fill in the details below. me dress mber, Street, City, State and ZIP Code)	Date Issued			
Pai	rt 12	Sign Below				
I ha are with 18 U	ve re true a b J.S.C Cei	ead the answers on this Statement of Fi and correct. I understand that making a ankruptcy case can result in fines up to C. §§ 152, 1341, 1519, and 3571. ona K. Harris a K. Harris	a false statement, concealing proper	ty, or	obtaining money or proper	
Sig	ınatı	re of Debtor 1				
Da	te _	April 12, 2019	Date			
Did ■ N	No.	attach additional pages to Your Staten	nent of Financial Affairs for Individua	als Filii	ng for Bankruptcy (Official	Form 107)?
Did ■ N	-	pay or agree to pay someone who is no	ot an attorney to help you fill out ban	krupto	cy torms?	
		Name of Person Attach the Banki	ruptcy Petition Preparer's Notice, Decla	aration,	and Signature (Official Form	n 119).
					•	

Debtor 1 Ceiona K. Harris

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

## The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

# Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure</a>.

### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html.

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

### United States Bankruptcy Court District of Maryland

		District of Mai yiand		
re	Ceiona K. Harris	D.L. ()	_ Case No.	
		Debtor(s)	Chapter	
	VEI	RIFICATION OF CREDITOR N	MATRIX	
ıb	ove-named Debtor hereby verifie	es that the attached list of creditors is true and co	rrect to the best	of his/her knowledge.
te:	April 12, 2019	/s/ Ceiona K. Harris		
		Ceiona K. Harris		

Signature of Debtor

Advanced Radiology 26999 Network Place Chicago, IL 60673-1269

Alteon Healkth Emergency Med. Assoc. PO Box 826481 Philadelphia, PA 19182-6481

Baltimore County Library 320 York Road Towson, MD 21204

Bruce E. Friedman 400 Redland Ct., Ste. 212 Owings Mills, MD 21117

Caine & Weiner 1005 Ford Rd. Dallas, TX 75234

Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Capital One Auto Finance Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Comptroller of Maryland Revenue Admins Division 110 Carroll St. Annapolis, MD 21411

Credit Collection Service 725 Canton Street Norwood, MA 02062

Credit Control 5757 Phantom Drive, Suite 330 Hazelwood, MO 63042 Credit One Bank Attn: Bankruptcy Department Po Box 98873 Las Vegas, NV 89193

District of Columbia Traffic Enforcement Office P.O.Box 37075 Washington, DC 20013

FedLoan Servicing Attn: Bankruptcy Po Box 69184 Harrisburg, PA 17106

First Premier Bank Attn: Bankruptcy Po Box 5524 Sioux Falls, SD 57117

Henderson-Webb, Inc PO Box 394 Cockeysville, MD 21030

Hertz Processing PO Box 659949 Saint Louis, MO 63195-6649

Internal Revenue Service PO Box 7346 Philadelphia, PA 19101-7346

Internal Revenue Service 31 Hopkins Plaza Room 1150 Baltimore, MD 21201

Liberty Mutual Insurance P.O. Box 8400 Dover, NH 03821

LVNV Funding/Resurgent Capital Attn: Bankruptcy Po Box 10497 Greenville, SC 29603

Midland Funding 2365 Northside Dr Ste 300 San Diego, CA 92108

MKR Real Estate, LLC 2212 Old Court Rd. Pikesville, MD 21208

Penn Credit 916 S. 14th PO Box 988 Harrisburg, PA 17108

Peroutka, Miller, Klima & Peters 8028 Ritchie Highway, Suite 300 Pasadena, MD 21122

Professional Account Management P.O. Box 37038 Washington, DC 20013

Progressive Leasing 256 West Data Drive Draper, UT 84020

Quest Diagnostic 1901 Sulpher Spring Road Halethorpe, MD 21227

QVC 100 QVC Boulevard Rocky Mount, NC 27815

Receivable Management Inc 7206 Hull Rd Ste 211 Richmond, VA 23235

State of Maryland Comptroller of the Treasury 301 W. Preston Street, Room 410 Baltimore, MD 21201 State of Maryland Central Collection Unit 300 W. Preston St., Rm. 407 Baltimore, MD 21201

Synchrony Bank Po Box 960061 Orlando, FL 32896

University of MD St Joseph Med Ctr PO Box 824778 Philadelphia, PA 19182-4778

Visa Bank/Macy's Attn: Bankruptcy Po Box 8053 Mason, OH 45040